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A/Re-Issue

PTO/SB/50 (4/98)

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## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:  Commissioner for Patents Box Patent Application Washington, DC 20231	Attorney Docket No.	05110-006001	j1046 U.S. PTO 09/03/95/6
	First Named Inventor	David J. Boothby	
	Original Patent Number	5,943,676	
	Original Patent Issue Date	August 24, 1999	
	Express Mail Label No.	EL624276505US	

## APPLICATION FOR REISSUE OF:

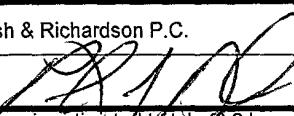
(check applicable box)

 Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS	
1. <input type="checkbox"/> * Fee Transmittal Form (PTO/SB/56) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification and Claims (amended, if appropriate)  3. <input checked="" type="checkbox"/> Drawing(s) (Proposed amendments, if appropriate)  4. <input checked="" type="checkbox"/> Reissue Oath / Declaration (original or copy)		7. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <i>(if applicable)</i> 8. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations  9. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(if applicable)</i> 10. <input type="checkbox"/> * Small Entity Statement(s) <input checked="" type="checkbox"/> Statement filed in prior application, status still proper and desired <i>(PTO/SB/09-12)</i>	
5. <input type="checkbox"/> Original U.S. Patent <input checked="" type="checkbox"/> Offer to surrender Original Patent (37 C.F.R. § 1.178) <i>(PTO/SB/53 or PTO/SB/54)</i>  <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Affidavit / Declaration of Loss (PTO/SB/55)		11. <input type="checkbox"/> Preliminary Amendment  12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> Microfiche Appendix;	
6. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53 or 54) <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney		13. <input checked="" type="checkbox"/> Other: <i>Patentee notes that certificate of correction issued 3/13/01; those corrections will be entered in the text subsequent to this filing</i>	
<div style="border: 1px solid black; padding: 5px; text-align: center;">           * Note for items 1&amp;10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES. A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27). except if one filed in a prior application is relied upon (37 C.F.R. § 1.28)         </div>			

## 14. CORRESPONDENCE ADDRESS

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